PART B - FEE(S) TRANSMITTAL

Complete and scheethis form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Pate Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885 INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. A further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless through 5 should be completed where appropriate. A further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notification of maintenance fees notification of maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notification of maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees notification of maintenance fees will be mailed to the current correspondence address as indicated unless. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 7590 07/12/2006 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. Lester J. Vincent Blakely, Sokoloff, Taylor, & Zafman LLP Seventh Floor 12400 Wilshire Boulevard (Depositor's name topher P. Marshall Los Angeles, CA 90025 (Signature (Date CONFIRMATION NO. APPLICATION NO **FILING DATE** FIRST NAMED INVENTOR ATTORNEY DOCKET NO. 01/17/2002 3660P068 1484 10/052,064 Erik P. Young TITLE OF INVENTION: METHOD AND SYSTEM FOR SUPPLIER PRIORITIZATION DATE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE APPLN. TYPE SMALL ENTITY **ISSUE FEE DUE** PUBLICATION FEE DUE 10/12/2006 \$0 \$1400 nonprovisional NO \$1400 \$0 ART UNIT **EXAMINER CLASS-SUBCLASS** GARG, YOGESH C 3625 705-026000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list BLAKELY, SOKOLOFF, TAYLOR (1) the names of up to 3 registered patent attorneys \square Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, & ZAFMAN LLP (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) 19/17/2006 CNEGA2 99999957 18852864 PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment 11361. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE Ariba, Inc. Sunnyvale, California Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🔀 Corporation or other private group entity 🚨 Government 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) 4a. The following fee(s) are submitted: XXIssue Fee **XX**A check is enclosed. ☐ Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02-2666 (enclose an extra copy of this form). XXAdvance Order - # of Copies ten (10) 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Date October 12, 2006

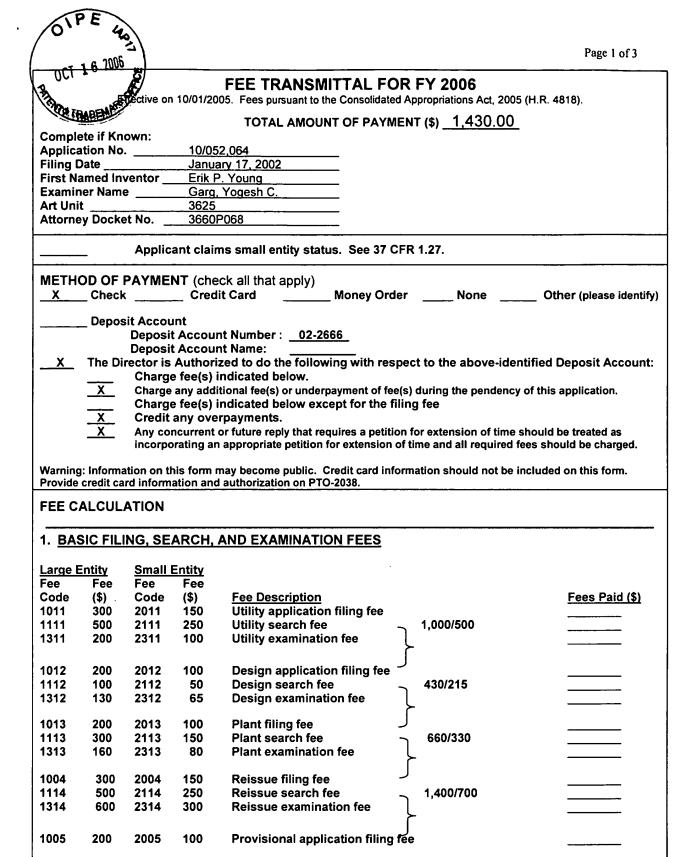
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Typed or printed name <u>Lester J. Vincent</u>

Authorized Signature

Registration No. 31,460



SUBTOTAL (1) \$ 0.00

2. EXCESS CLAIM FEES

	Extra Claims	Fee from <u>below</u>	Fees Paid (\$)
Total Claims HP = highest number of total	20 or HP = al claims paid for, if greater than 20	х	_ =
Independent Claims	- 3 or HP = ependent claims paid for, if greater than 3	х	_ =
Multiple Dependent Clai			

Large Entity Small Entity		Entity			
	Fee	Fee	Fee	Fee	
	Code	(\$)	Code	(\$)	Fee Description
	1202	50	2202	25	Each claim over 20
	1201	200	2201	100	Each independent claim over 3
	1203	360	2203	180	Multiple dependent claims, if not paid
	1204	200	2204	100	Reissue: each claim over 20 and more than in the original patent
	1205	50	2205	25	Reissue: each independent claim more than in the original patent
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SUBTOTAL (2) \$ 0.00

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra S	Sheets	Number of each add'l 50 or fraction thereof	Fee from below	Fees paid (\$)
	- 100 =	/ 50 =	(round up to whole number)	x	
Large Entity Fee Fee Code (\$)	Small Entity Fee Fee Code (\$)		ntion: Application size fee for ea al 100 sheets (count spec & drawin		
1081 250 1082 250 1083 250 1084 250	2081 125 2082 125 2083 125 2084 125	Utility Design Plant Reissue			

SUBTOTAL (3) \$ 0.00

FEE CALCULATION (continued) 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Large Entity **Small Entity** Fee Fee Fee Fee (\$) Code Code (\$) **Fee Description** 1051 130 2051 Surcharge - late filing fee or oath 65 1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet 1053 130 1053 130 Non-English specification 1812 2,520 1812 2,520 For filing a request for ex parte reexamination 1813 8.800 1813 8,800 Request for inter parties reexamination 1804 920* 1804 920* Requesting publication of SIR prior to Examiner action 1805 1,840* 1805 1,840* Requesting publication of SIR after Examiner action 1251 120 2251 60 Extension for reply within first month 1252 450 2252 225 Extension for reply within second month 1253 2253 1,020 510 Extension for reply within third month 1254 1,590 2254 795 Extension for reply within fourth month 1,080 1255 2255 2,160 Extension for reply within fifth month 1401 500 2401 250 **Notice of Appeal** 1402 500 2402 250 Filing a brief in support of an appeal 1403 1,000 2403 500 Request for oral hearing 1451 1,510 1451 1,510 Petition to institute a public use proceeding 1452 500 2452 250 Petition to revive - unavoidable 1453 1.500 2453 750 Petition to revive - unintentional 1501 1.400 2501 700 Utility issue fee (or reissue) 1.400.00 1502 800 2502 400 Design issue fee 1503 1100 2503 550 Plant issue fee 400 1462 400 Petitions to the Commissioner (CFR 1.17(f) Group I) 1462 1463 200 1463 200 Petitions to the Commissioner (CFR 1.17(g) Group II) 1464 130 1464 130 Petitions to the Commissioner (CFR 1.17(h) Group III) 1807 50 1807 50 Processing fee under 37 CFR 1.17(q) 1806 180 1806 180 **Submission of Information Disclosure Stmt** 8021 40 8021 40 Recording each patent assignment per property (times number of properties) 1809 790 2809 395 For filing a submission after final rejection (see 37 CFR 1.129(a)) 1814 130 2814 65 Statutory Disclaimer 1810 790 2810 395 For each additional invention to be examined (see 37 CFR 1.129(b)) 1801 2801 395 790 Request for Continued Examination (RCE) 1802 1802 900 900 Request for expedited examination of a design application 1504 300 1504 300 Publication fee for early, voluntary, or normal pub. 1505 300 1505 300 Publication fee for republication 1803 130 1803 130 Request for voluntary publication or republication 1808 130 1808 130 Processing fee under 37 CFR 1.17(i) (except provisionals) 1454 1,370 1454 1,370 Acceptance of unintentionally delayed claim for priority Other fee (specify) Printed Copy of patent w/o color (10 copies) 30.00 Other fee (specify) SUBTOTAL (4) \$ 1,430.00 *Reduced by Basic Filing Fee Paid SUBMITTED BY: Typed or Printed Name: Lester J. Vincent Date: October 12, 2006 Signature: Reg. Number: _31,460 **Telephone Number:** 408-720-8300

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